24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
CREDO SUPERPAĆ	C C00507517	
Check If X 24-hour report 48-hour report New report Amends report filed of	on	
Full Name (Last, First, Middle Initial) of Payee Alliance Graphics	Date	
Mailing Address 1101 8th Street, Suite 100	10 18 2012 Amount	
City State Zip Code	3101.12	
Berkeley CA 94710	ransaction ID : SE.10549	
Purpose of Expenditure Printing Category/ Type Office	Sought: House State: CA Senate District: 07	
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN Check	President C One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 43847.89 Disbut	rsement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Alliance Graphics	Date 10 18 2012	
Mailing Address 1101 8th Street, Suite 100	Amount	
City State Zip Code Berkeley CA 94710	3485.79	
	Sought: Se.10550 State: CA Senate District: 07	
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN Check	President One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disbu 2012	rsement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	6586.91	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Becky Bond [Electronically Filed] Date Signature	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CREDO SUPERPAC	C C00507517
Check If X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Karia Salazar	M M / D D / Y Y Y Y
Mailing Address 1237 S Everglade St	10 18 2012
City State Zip Code	
Santa Ana CA 92704	937.50 nsaction ID : SE.10548
Purpose of Expenditure Strategic Consulting Category/ Type Office So	Senate District: 07
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
DANIEL E. LUNGREN Check Or	
Calendar Year-To-Date Per Election for Office Sought Disburser 2012	ment For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	
	M M / D D / Y Y Y Y
Mailing Address	
	nount
City State Zip Code	7 7
Purpose of Expenditure Category/ Type Office So	ought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Check Or	ne: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburser	ment For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	937.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7524.41
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Becky Bond [Electronically Filed] Date 10	19 2012
Signature	